

# TIFFIN FIRE/RESCUE DIVISION

53 S Monroe St.  
Tiffin, Ohio 44883-2836  
Office: 419-448-5444  
Fax: 419-448-5421

Fire Chief Kevin S. Veletean  
E-Mail [firechief@tiffinohio.gov](mailto:firechief@tiffinohio.gov)

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## FIRE ALARM & DETECTION EQUIPMENT CONTRACTORS

Chapter 142 "Alarm Systems", Tiffin Codified Ordinances requires the issuance of an "Alarm Permit" for the installation of any alarm system in the City of Tiffin.

The City of Tiffin offers **Central Station Monitoring** of Digital Dialers alarm systems. The Central Station Monitoring is offered free of charge to the businesses & citizens of Tiffin, while the Alarm Permit requires an annual fee of \$25.00.

**The Tiffin Fire/Rescue Division issues all permits and competes all of the connections to our Central Dispatch monitoring equipment.**

Attached to this information sheet is a copy of the following:

1. **Application for Alarm Permit:** The application for an alarm permit shall be completed and returned prior to the start of the installation of any alarm system.
2. **Digital Dialer Protocol Sheet:** This protocol information provides for an effective and standardized operation of the alarm monitoring system equipment.
3. **Zone Settings Worksheet For Alarm Monitoring:** This information will enable the dialer to be configured so as to be compatible with our Central Station Monitoring equipment.
4. **City of Tiffin-Alarm Monitoring Agreement:** This agreement form must be completed and returned prior to connection of any alarm system to Tiffin's Central Station Monitoring equipment.

The customer ID number is assigned upon receipt of the Application for Alarm Permit & Alarm Monitoring Agreement. To obtain the customer ID number and schedule a connection date (**this request must be made a minimum of three work days prior to connection**) or additional information, call the Fire/Rescue Division between the hours of 8:30 A.M. and 4:30 P.M. Monday through Friday.

Thank You!



Kevin S. Veletean, Fire Chief

**Smoke Detectors Can Save Lives**

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## Alarm Installer:

To allow for the most effective and standardized operation of the alarm system at the Tiffin Dispatch Center, the following Digital Dialer protocol is required.

- 1). The dialer must be a pulsed dialer with a rate of 20PPS.
- 2). Transmit with a data tone of 1400 Hertz.
- 3). Must use a 4-2 Format.
- 4). Can be non-extended if less than 4 zones.
- 5). Do not use checksum.
- 6). A format table must be available for system programming.
- 7). Dialer must be capable of being silenced by user.

Although Digital Dialers meeting this protocol should be compatible with our system, some dialers may not communicate and another type of dialer may need to be used.

**Smoke Detectors Can Save Lives**





Effective April 1, 2010, the City of Tiffin is charging an annual fee of **\$25.00** for alarm permits. City Ordinance 142.02 requires anyone who has an alarm system within the city limits to secure a permit for said alarm. Whoever violates any provision of this ordinance may be charged with a minor misdemeanor.

Please pay within 20 days of receipt of alarm application and include the form provided at the bottom of the page along with your payment of **\$25.00 and application** made payable to:

**Tiffin Fire/Rescue Division  
53 S. Monroe St.  
Tiffin, OH 44883**

Alarm permit will **not** be issued without payment.

-----  
Cut along dotted line

Name _____
Address _____
Date _____
Permit # _____ Found on top left of application

For office use only:

Fee Paid \_\_\_\_\_ Check# \_\_\_\_\_ MO# \_\_\_\_\_ Cash \_\_\_\_\_ Date Received \_\_\_\_\_

First Notice \_\_\_\_\_ Second Notice \_\_\_\_\_ Alarm permit to applicant \_\_\_\_\_



CITY OF TIFFIN - ALARM MONITORING AGREEMENT

Subscriber Name \_\_\_\_\_ Account# \_\_\_\_\_  
 Address \_\_\_\_\_ Permit # \_\_\_\_\_  
 Premise Phone # \_\_\_\_\_ Cross Street \_\_\_\_\_  
 Billing Address (if different from above) \_\_\_\_\_

CONTACT / CALL LIST, RESPONSIBLE PARTIES:

Name	Address	Phone #

Communicator (Dialer) \_\_\_\_\_ Model# \_\_\_\_\_  
 Intrusion Panel # \_\_\_\_\_ Format Response \_\_\_\_\_ Auto Test Time \_\_\_\_\_

Daily	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Open/Time							
Close/Time							
Window							

Holidays Closed \_\_\_\_\_

Zone	Protected Area	Audio	Silent	Verify	Alarm Type

Special Instructions: \_\_\_\_\_  
 \_\_\_\_\_

Authorized Signature

Date

## SYSTEM 300N INSTALLATION AND OPERATION MANUAL

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Total 19 Zones

Zone Settings Worksheet

Configuration #     3    

English Equivalent Worksheet

Configuration#     3    

ZONE	ALARM	TROUBLE	SECTION
01	01		21
02	02		22
03	03		23
04	04		24
05	05		25
06	06		26
07	07		27
08	08		28
09	09		29
10			
11		61	71
12		62	72
13		63	73
14		64	74
15		65	75
16		66	76
17		67	77
18		68	78
19		69	79
20	10		40
21	11		41
22	12		42
23	13		43
24	14		44
25	15		45
26	16		46
27	17		47
28	18		48
29	19		49
30		50	90
31		51	91
32		52	92
33		53	93
34		54	94
35		55	95
36		56	96
37		57	97
38		58	98
39		59	99
40			

PROCESS	FOR
DAILY TEST	30
SECURE ALL	
OPENING	
CLOSING	
AC FAILURE	60
AC NOW OK	70
PHONE LINE 1?	31
LINE 1 OK	35
GRND FAULT	33
GRND NOW OK	37
BATTERY FAIL	34
BATTERY OK	38
PHONE LINE 2?	32
LINE 2 OK	36

# SYSTEM 300N INSTALLATION AND OPERATION MANUAL

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Total 19 Zones

Zone Settings Worksheet

Configuration # \_\_\_\_\_ 5 \_\_\_\_\_

English Equivalent Worksheet

Configuration# \_\_\_\_\_ 5 \_\_\_\_\_

ZONE	ALARM	TROUBLE	SECTION
01	31		91
02	32		92
03	33		93
04	34		94
05	35		95
06	36		96
07	37		97
08	38		98
09	39		99
10	40		80
11	41		81
12	42		82
13	43		83
14	44		84
15	45		85
16	46		86
17	47		87
18	48		88
19	49		89
20			
21		51	01
22		52	02
23		53	03
24		54	04
25		55	05
26		56	06
27		57	07
28		58	08
29		59	09
30		60	10
31		61	11
32		62	12
33		63	13
34		64	14
35		65	15
36		66	16
37		67	17
38		68	18
39		69	19
40			

PROCESS	FOR
DAILY TEST	30
SECURE ALL	
OPENING	
CLOSING	
AC FAILURE	20
AC NOW OK	50
PHONE LINE 1?	21
LINE 1 OK	25
GRND FAULT	23
GRND NOW OK	27
BATTERY FAIL	24
BATTERY OK	28
PHONE LINE 2?	22
LINE 2 OK	26